

# Work Order ID 86592

**\*86592\***

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Item ID: D350-607-241

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Basket Clamp Assembly

Start Date: 7/05/12 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 7/27/12 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Run Start **\*NR1\***

Approvals: Process Plan: CL Date: 12/07/05 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D350-607-1	A

100

0.00

**\*100\***

DC

Document Control

Memo

0.00

Photocopy bluefile & type labels per PPP D350-607-241  
CHG001  
Paperwork not req'd if packaged with basket



12/06/07

OK for mlt 12/8/27

110

Pick Kit

0.00

**\*110\***

Packaging

Packaging

Memo

0.00

OK 12/8/24

120

QC4- 100% Inspect kits for completeness

0.00

**\*120\***

QC

Quality Control

Memo

0.00



12/08/07

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Work Order ID 86592

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Item ID: D350-607-241

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Basket Clamp Assembly

Start Date: 7/05/12 Start Qty: 2.00 **\*2\***

Cust Item ID:

Required Date: 7/27/12 Req'd Qty: 2.00 **\*2\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
<b>*130*</b>									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D350-607-241								
	Location: <u>PK12</u>								
	PPP rev: _____								
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

*6867sf*

*CK 12/8/28*

*ME  
12-08-28*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
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**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 86592

Parent Item: D350-607-241

Parent Item Name: Basket Clamp Assembly

Start Date: 7/05/12

Required Date: 7/27/12

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP RevA: New issue DD verified by:EC  
10.04.16 verified by:EC

IPP Rev:B as per ECN10-545 DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
<i>S</i> D2230-1 Lug		Manufactured	No			110	Each	240.0000	4	8			<i>sl</i>
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST480		240							
				84135		40							
				<u>84136</u>		200							
<i>S</i> D2230-3 Lug		Manufactured	No			110	Each	158.0000	4	8			<i>sl</i>
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST480		158							
				83261		2							
				84133		156							
<i>S</i> D2324 Strut		Manufactured	No			110	Each	13.0000	1	2			<i>sl</i>
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST511		13							
				<u>82605</u>		13							
<i>S</i> D2732 Rubber Extrusion		Manufactured	No			110	f	500.6000	2	4			<i>sl</i>
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST410		500.6							
				70987		4.6							
				<u>83560</u>		496							
<i>S</i> AN4-12A Bolt		Purchased	No			110	Each	489.0000	1	2			<i>sl</i>
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST357		489							
				<u>120423</u>		464							
				121524		25							

1- cut qty (8) 3.00" long per dwg D2732-030

AN4-12A  
Bolt

12/8/24

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
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**NOTE:** Date & initial all entries

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Work Order ID: 86592

Parent Item: D350-607-241

Parent Item Name: Basket Clamp Assembly

Start Date: 7/05/12

Required Date: 7/27/12

Start Qty: 2.00

Required Qty: 2.00

S  
+2

AN4-15A Purchased No

110 Each 604.0000 12 24

Bolt

Location	Loc Qty	Loc Code
358	100	
121652	100	
GA	100	
120449	100	
ST358	404	
118706	3	
120422	1	
122141	400	

24 S

S  
+2

NAS1149D0463J Purchased No

110 Each 2,496.0000 26 52

Washer

Location	Loc Qty	Loc Code
ST298	89	
104746	3	
116805	0	
119097	27	
121255	48	
121708	11	
ST299	2404	
121912	2404	
ST351	3	
107321	3	

M122441

S  
+2

MS21042L4 Purchased No

110 Each 1,705.0000 13 26

Nut

Location	Loc Qty	Loc Code
ST300	1705	
119075	116	
121011	193	
121444	1096	
121652	300	

M122452

12/8/24

W/O:		WORK ORDER CHANGES					
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Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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